

- SENDER: COMPLETE THIS SECTION**
- Complete items 2, and 3. Also complete item 4 if Restricted Delivery is desired.
  - Print your name and address on the reverse so that we can return the card to you.
  - Attach this card to the back of the mailpiece, or on the front if space permits.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: [Signature]

B. Received by (Printed Name): \_\_\_\_\_

☐ Agent  
☐ Addressee

Is delivery address different from its permanent address?  
If YES, enter delivery address below:  
DECV 8C  
Proctor

Date of Delivery: 12/06  
☐ Yes  
☐ No

3. Service Type  
☒ Certified Mail  
☒ Registered  
☒ Insured Mail  
☐ Express Mail  
☐ Return Receipt  
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)  
☐ Yes  
☐ No

Barry King  
Attorney General for the State of AL  
111 S. Union Street  
Montgomery, AL 36101

2. Article Number (Transfer from): 7005 1820 0002 3461 0393

PS Form 3811, February 2004

Domestic Return Receipt